U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	For Street fine only
E	OLMS DRUTT

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 3750	2. Fiscal Year Covered From:		
	1/1/04 Through: 12/31/04		
3. Name and address of person filing.	Name, file number, and address of labor organization.		
Name RUSSEll C NORdSTEd+	Name MOTION PICTURE STUDIO GRIPS		
	Labor Organization File Number 006-114		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 6301 TUNNEY AVE	Street 2520 West office Ave		
CITY TARZAWA	City BURBAUK		
State CM 91835 ZIP Code + 46662	State CA 9/50/ ZIP Code + 4 45 33		
5. Position in labor organization. C-Board member			
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of			
monetary value from an employer whose employees your organizati	7.a. Nature of Interest, Transaction, or Income.		
6. Name and address of Employer (including trade name, if any).	go and weather the control of the control of a margine for the control of the photography and a marginal production of the control of the con		
Name 20TH CENTURY FOX	PRODUCTION COMPANY		
Trade Name, if any: Jude MG My	RIDEING EQUIPMENT		
P.O. Box, Bldg., Room No., if any PO BOX GOD	The state of the s		
	7.b. Amount.		
Street 10201 W. PICO BLVd.			
city BEVERLY HILS	\$57,020.00		
State CA 902/3 ZIP Code +4			
Signature			
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)			
Signed Revell Novelles on 6/28/05 8/8-439-9/49 Date Telephone Number			